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Complete if Known

Application Number	10/669,478
Filing Date	September 23, 2003
First Named Inventor	Tejaswini, FNU
Group Art Unit	2617
Examiner Name	Mehra, Inder

Sheet 1 of 1

Attorney Docket No: 884.931US1

US PATENT DOCUMENTS

Examiner Initial*	USP Document Number	Publication Date	Name of Patentee or Applicant of cited Document	Filing Date If Appropriate
gm	US-2004/0236851A1	11/25/2004	Kuan, Chia-Chee, et al.	06/28/2004
gm	US-2005/0143132A1	08/30/2005	Proctor, JR., James A., et al.	09/09/2004
gm	US-5,950,130	09/07/1999	Coursey, Cameron	03/18/1997

FOREIGN PATENT DOCUMENTS

Examiner Initial*	Foreign Document No	Publication Date	Name of Patentee or Applicant of cited Document	T*
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OTHER DOCUMENTS -- NON PATENT LITERATURE DOCUMENTS

Examiner Initial*	Cite No	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T*
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EXAMINER

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DATE CONSIDERED

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